

Lecture Vol. 13 # 16 November 13, 1987 cover

Address

By

C. Everett Koop, MD, ScD

Surgeon General

Of the

U.S. Public Health Service

U.S. Department of Health and Human Services

Presented to the National Conference on

Alcohol Abuse and Alcoholism

Washington, DC

November 13, 1987

---

Those who preceded me on this occasion gave specific reasons for having such a conference and for moving ahead with a program to fight alcoholism. They presented those reasons with such conviction and great eloquence that I did not repeat any of those arguments during my few minutes at the lectern.

I had two major points to make. First, I'd spoken out on alcohol abuse and alcoholism over the years. Indeed, the first public statement I issued as Surgeon General was a warning about fetal alcohol syndrome. It was not much to say, but it certainly said a lot: "If you drink alcohol while you're pregnant, your baby may be seriously and irreversibly damaged."

Over twenty years ago the United States Congress told the Surgeon General to exercise leadership in the field of smoking. I'd been doing that just as my immediate four predecessors had. Then a year before this lecture, President Reagan directed me to do something about AIDS, and that certainly changed my working day. Having no assigned duty and no mandate to talk about alcohol, it was difficult for me to do. And when I did express my opinions on the matter, not many people showed much interest. I said that the way I did, because I attach great significance to the fact that the Secretary of Health and Human Services, my boss and good friend, Dr. Otis Bowen, had taken the bold step of putting his department and everybody in it on the line as far as alcohol was concerned.

So, the Surgeon General got help that week – we all did – when Dr. Bowen delivered his strong statement the morning before the talk, and in effect, gave us new marching orders. Dr. Bowen was a real leader – one with a calm, but a firm voice, that provided guidance and leadership and on this occasion he had once again stepped forward to do just that. The Secretary had stature and authority. So, we looked forward toward some progress.

My second point was that the United States Public Health Service and several hundred experts from across disciplines and from around the country had put together a set of "objectives for the nation" in the area of health promotion and disease prevention, back in 1979 and 1980. This was an enormous undertaking and a truly historic one. Finally we had before us a set of measurable, quantitative goals for achieving by the year 1990 – a greatly improved level of health status for the people of the United States.

The objectives included lower infant mortality rates, lower death rates on the highway, lower morbidity and mortality rates from heart disease, cancer, and stroke, lower rates of cigarette smoking, less sodium intake, lower serum cholesterol levels, and so on, and so on. We'd been tracking these things since 1979 and at that time we were looking ahead to setting new objections for the year 2000.

There is one element that cuts across all these objectives – the old ones and the new ones and that is human behavior. For example, we wanted to lower the rate of teenage pregnancies for many reasons, but we don't have any magic vaccine to prevent teenage women from becoming pregnant. In fact, nothing works quite as well as a young woman's own determination not to get pregnant. Alcohol is clearly implicated as a key factor in the breakdown of a person's own protective and preventive behavior in this regard. So no matter what we do with clinics and in-school sex education courses and the help of churches and so on, if we don't recognize the influence of alcohol, we're wasting time and money.

Another issue we were very concerned about was occupational health and safety and we hoped to achieve significant gains by 1991 and even great gains by the year 2000. We had all sorts of suggestions about worker's health and safety, but none of these work if the judgment of the worker is altered by alcohol. Contrary to the TV ads that were then permitted on television, drinking a lot of beer out on the job is not the manly thing to do; it's stupid, dangerous behavior.

We simply can not continue to have high levels of traffic in any drugs – including alcohol or tobacco – and still hope to raise the health status of the American people up there onto the higher plateau where it ought to be. That's why the sixteen or so public health initiatives discussed at that conference are still so important.

I closed with thanking the Secretary again and all those who were sharing knowledge and experience.